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| United States Bankruptcy Court Northern District of Illinois                                                                                                                                                                                                                                                                                       |                                                                                                                       |                                                       |                                                                                                      |                                                                          | Volun                                                                                       | tary Petition                                    |                                                       |                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------|
| Name of Debtor (if individual, enter Last, First, Wagner, Mary D.                                                                                                                                                                                                                                                                                  | Middle):                                                                                                              |                                                       | Name                                                                                                 | of Joint De                                                              | btor (Spouse                                                                                | ) (Last, First                                   | , Middle):                                            |                                                                           |
| All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):                                                                                                                                                                                                                                                       | years                                                                                                                 |                                                       |                                                                                                      |                                                                          | used by the J<br>maiden, and                                                                |                                                  | in the last 8 yea<br>):                               | rs                                                                        |
| Last four digits of Soc. Sec. or Individual-Taxpay (if more than one, state all)  xxx-xx-7749                                                                                                                                                                                                                                                      | yer I.D. (ITIN)/Comp                                                                                                  | olete EIN                                             | Last for                                                                                             | our digits of<br>than one, state                                         | f Soc. Sec. or                                                                              | Individual-                                      | Гахрауег I.D. (I                                      | TIN) No./Complete EIN                                                     |
| Street Address of Debtor (No. and Street, City, at 453 Raintree Drive #1L                                                                                                                                                                                                                                                                          | nd State):                                                                                                            | ZIP Code                                              | Street                                                                                               | Address of                                                               | Joint Debtor                                                                                | (No. and Str                                     | reet, City, and S                                     | tate):  ZIP Code                                                          |
| Glen Ellyn, IL                                                                                                                                                                                                                                                                                                                                     | 6                                                                                                                     | 60137                                                 | -                                                                                                    |                                                                          |                                                                                             |                                                  |                                                       | ZIP Code                                                                  |
| County of Residence or of the Principal Place of <b>DuPage</b>                                                                                                                                                                                                                                                                                     | Business:                                                                                                             |                                                       | Count                                                                                                | y of Reside                                                              | nce or of the                                                                               | Principal Pla                                    | ace of Business:                                      |                                                                           |
| Mailing Address of Debtor (if different from stre                                                                                                                                                                                                                                                                                                  | et address):                                                                                                          |                                                       | Mailin                                                                                               | g Address                                                                | of Joint Debt                                                                               | or (if differe                                   | nt from street ac                                     | ldress):                                                                  |
|                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                       | ZIP Code                                              |                                                                                                      |                                                                          |                                                                                             |                                                  |                                                       | ZIP Code                                                                  |
| Location of Principal Assets of Business Debtor (if different from street address above):                                                                                                                                                                                                                                                          |                                                                                                                       |                                                       |                                                                                                      |                                                                          |                                                                                             |                                                  |                                                       |                                                                           |
| Type of Debtor (Form of Organization) (Check one box)                                                                                                                                                                                                                                                                                              |                                                                                                                       | f Business<br>one box)                                |                                                                                                      |                                                                          |                                                                                             |                                                  | otcy Code Undo                                        |                                                                           |
| <ul> <li>Individual (includes Joint Debtors)         See Exhibit D on page 2 of this form.</li> <li>□ Corporation (includes LLC and LLP)</li> <li>□ Partnership</li> <li>□ Other (If debtor is not one of the above entities, check this box and state type of entity below.)</li> </ul>                                                           | ☐ Health Care Bus ☐ Single Asset Resin 11 U.S.C. § 1 ☐ Railroad ☐ Stockbroker ☐ Commodity Bro ☐ Clearing Bank ☐ Other | al Estate as d<br>01 (51B)                            | efined                                                                                               | Chapte Chapte Chapte Chapte Chapte                                       | er 9<br>er 11<br>er 12                                                                      | of<br>□ Cl<br>of                                 | a Foreign Mair<br>hapter 15 Petitio<br>a Foreign Noni | on for Recognition<br>Proceeding<br>on for Recognition<br>main Proceeding |
| Chapter 15 Debtors  Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:                                                                                                                                                                                         | ebtors  ain interests:  Tax-Exempt Entity (Check box, if applicable proceeding  Debtor is a tax-exempt organiz        |                                                       |                                                                                                      | defined<br>"incurr                                                       | re primarily co<br>l in 11 U.S.C. §<br>ed by an indivi<br>nal, family, or                   | (Checlonsumer debts, 101(8) as dual primarily    | for                                                   | Debts are primarily business debts.                                       |
| Filing Fee (Check one box)  Full Filing Fee attached  Filing Fee to be paid in installments (applicable to i attach signed application for the court's consideration debtor is unable to pay fee except in installments. R Form 3A.  Filing Fee waiver requested (applicable to chapter 7 attach signed application for the court's consideration. | ndividuals only). Must<br>on certifying that the<br>tule 1006(b). See Offici                                          | al Del Check if:  al Del are  Check all  St A p  A co | btor is a sn<br>btor is not<br>btor's aggr<br>less than s<br>applicable<br>olan is bein<br>ceptances | regate nonco<br>\$2,490,925 (as boxes:<br>ag filed with<br>of the plan w | debtor as defir<br>ness debtor as c<br>ntingent liquida<br>amount subject<br>this petition. | defined in 11 United debts (exc<br>to adjustment | C. § 101(51D).  J.S.C. § 101(51D)  Cluding debts owen | d to insiders or affiliates)<br>very three years thereafter               |
| Statistical/Administrative Information  Debtor estimates that funds will be available Debtor estimates that, after any exempt prope                                                                                                                                                                                                                |                                                                                                                       | secured credi                                         | itors.                                                                                               |                                                                          | s.C. § 1126(b).                                                                             | THIS                                             | SPACE IS FOR                                          | COURT USE ONLY                                                            |
| there will be no funds available for distribution                                                                                                                                                                                                                                                                                                  |                                                                                                                       |                                                       |                                                                                                      | os puid,                                                                 |                                                                                             |                                                  |                                                       |                                                                           |
|                                                                                                                                                                                                                                                                                                                                                    | ,000-<br>5,000 10,000                                                                                                 |                                                       | 5,001-<br>0,000                                                                                      | 50,001-<br>100,000                                                       | OVER 100,000                                                                                |                                                  |                                                       |                                                                           |
| Estimated Assets                                                                                                                                                                                                                                                                                                                                   |                                                                                                                       | \$50,000,001 \$ to \$100                              |                                                                                                      |                                                                          |                                                                                             |                                                  |                                                       |                                                                           |
|                                                                                                                                                                                                                                                                                                                                                    | 11,000,001 \$10,000,001 to \$50                                                                                       | \$50,000,001 \$ to \$100 to                           | 100,000,001<br>0 \$500                                                                               | \$500,000,001<br>to \$1 billion                                          | More than \$1 billion                                                                       |                                                  |                                                       |                                                                           |

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Wagner, Mary D. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Rae Kaplan November 19, 2015 Signature of Attorney for Debtor(s) (Date) Rae Kaplan Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

### **B1** (Official Form 1)(04/13)

# **Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

Wagner, Mary D.

### Signatures

### $Signature (s) \ of \ Debtor (s) \ (Individual/Joint)$

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Mary D. Wagner

Signature of Debtor Mary D. Wagner

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

November 19, 2015

Date

### Signature of Attorney\*

## X /s/ Rae Kaplan

Signature of Attorney for Debtor(s)

Rae Kaplan

Printed Name of Attorney for Debtor(s)

Kaplan Bankruptcy Firm, LLC

Firm Name

25 East Washington St Suite 1501 Chicago, IL 60602

Address

Email: rkaplan@financialrelief.com (312) 294-8989 Fax: (312) 294-8995

Telephone Number

November 19, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| - |  |
|---|--|
|   |  |

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court Northern District of Illinois

| In re | Mary D. Wagner |           | Case No. |   |
|-------|----------------|-----------|----------|---|
|       |                | Debtor(s) | Chapter  | 7 |
|       |                |           |          |   |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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| B 1D (Official Form 1, Exhibit D) (12/09) - Cont.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Page 2                                                                                                                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| ž ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | S.C. § 109(h)(4) as impaired by reason of mental illness or mental lizing and making rational decisions with respect to financial                     |
| • •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | S.C. § 109(h)(4) as physically impaired to the extent of being cipate in a credit counseling briefing in person, by telephone, or litary combat zone. |
| ☐ 5. The United States trustee or bank requirement of 11 U.S.C. § 109(h) does not approximately 100 to 100 | ruptcy administrator has determined that the credit counseling oply in this district.                                                                 |
| I certify under penalty of perjury th                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | at the information provided above is true and correct.                                                                                                |
| Signature of De                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                       |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Mary D. Wagner                                                                                                                                        |
| Date: Novem                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ber 19, 2015                                                                                                                                          |

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B6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Mary D. Wagner |        | Case No. |   |
|-------|----------------|--------|----------|---|
| _     |                | Debtor |          |   |
|       |                |        | Chapter  | 7 |
|       |                |        | •        |   |

# SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE                                                                   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|------------------------------------------------------------------------------------|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property                                                                  | Yes                  | 1                | 70,000.00         |             |          |
| B - Personal Property                                                              | Yes                  | 3                | 51,975.00         |             |          |
| C - Property Claimed as Exempt                                                     | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims                                               | Yes                  | 1                |                   | 93,786.00   |          |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 3                |                   | 42,044.40   |          |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |             |          |
| H - Codebtors                                                                      | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 2                |                   |             | 3,208.23 |
| J - Current Expenditures of Individual<br>Debtor(s)                                | Yes                  | 2                |                   |             | 3,205.90 |
| Total Number of Sheets of ALL Schedu                                               | ıles                 | 16               |                   |             |          |
|                                                                                    | T                    | otal Assets      | 121,975.00        |             |          |
|                                                                                    |                      |                  | Total Liabilities | 135,830.40  |          |

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B 6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Mary D. Wagner |        | Case No. |   |  |
|-------|----------------|--------|----------|---|--|
| -     | <del>-</del>   | Debtor |          |   |  |
|       |                |        | Chapter  | 7 |  |

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability                                                                                                   | Amount |
|---------------------------------------------------------------------------------------------------------------------|--------|
| Domestic Support Obligations (from Schedule E)                                                                      | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)                                          | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)                                                                          | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL                                                                                                               | 0.00   |

#### State the following:

| Average Income (from Schedule I, Line 12)                                                      | 3,208.23 |
|------------------------------------------------------------------------------------------------|----------|
| Average Expenses (from Schedule J, Line 22)                                                    | 3,205.90 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 1,982.00 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |      | 0.00      |
|----------------------------------------------------------------------------|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F                                                   |      | 42,044.40 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 42,044.40 |

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B6A (Official Form 6A) (12/07)

| In re | Mary D. Wagner | Case No. |  |
|-------|----------------|----------|--|
| _     |                |          |  |
|       |                | Debtor   |  |

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| one bedroom c | condo located at 453 Raintree Drive, | 1/4 interest                               | J                                           | 70,000.00                                                                                                    | 76,000.00                  |
|---------------|--------------------------------------|--------------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------|
| Desc          | cription and Location of Property    | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |

Sub-Total > 70,000.00 (Total of this page)

70,000.00 Total >

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B6B (Official Form 6B) (12/07)

| In re | Mary D. Wagner | Case No |  |
|-------|----------------|---------|--|
| _     |                | Debtor  |  |

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property                                                                                                                                                                                    | N O Description and Location of Property E                               | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property<br>without Deducting any<br>Secured Claim or Exemption |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------------------------------|
| 1.  | Cash on hand                                                                                                                                                                                        | X                                                                        |                                             |                                                                                                          |
| 2.  | Checking, savings or other financial                                                                                                                                                                | savings account at Citibank                                              | -                                           | 2,000.00                                                                                                 |
|     | accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | checking account at Citibank                                             | -                                           | 800.00                                                                                                   |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.                                                                                                                | X                                                                        |                                             |                                                                                                          |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.                                                                                                                    | miscellaneous household furniture, furnishings, goods & appliances       | -                                           | 1,000.00                                                                                                 |
| 5.  | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.                                                           | X                                                                        |                                             |                                                                                                          |
| 5.  | Wearing apparel.                                                                                                                                                                                    | necessary wearing apparel                                                | -                                           | 900.00                                                                                                   |
| 7.  | Furs and jewelry.                                                                                                                                                                                   | miscellaneous jewelry                                                    | -                                           | 200.00                                                                                                   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.                                                                                                                                       | x                                                                        |                                             |                                                                                                          |
| ).  | Interests in insurance policies.  Name insurance company of each policy and itemize surrender or                                                                                                    | life insurance policy through AARP-term policy-<br>beneficiary: Children | -                                           | 0.00                                                                                                     |
|     | refund value of each.                                                                                                                                                                               | life insurance policy through work-term policy-<br>beneficiary: Children | -                                           | 0.00                                                                                                     |
| 10. | Annuities. Itemize and name each issuer.                                                                                                                                                            | X                                                                        |                                             |                                                                                                          |
|     |                                                                                                                                                                                                     |                                                                          |                                             |                                                                                                          |
|     |                                                                                                                                                                                                     |                                                                          | Sub-Tota                                    | al > <b>4,900.00</b>                                                                                     |

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

| In  | re Mary D. Wagner                                                                                                                                                                                                                             |                  |                                             | Case No.                                    |                                                                                                           |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
|     | -                                                                                                                                                                                                                                             |                  | Debtor                                      |                                             |                                                                                                           |
|     | S                                                                                                                                                                                                                                             | SCHED            | ULE B - PERSONAL PROPE (Continuation Sheet) | RTY                                         |                                                                                                           |
|     | Type of Property                                                                                                                                                                                                                              | N<br>O<br>N<br>E | Description and Location of Property        | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | х                |                                             |                                             |                                                                                                           |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.                                                                                                                                                   | 401k p           | olan through Fidelity                       | -                                           | 37,800.00                                                                                                 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.                                                                                                                                                                   | X                |                                             |                                             |                                                                                                           |
| 14. | Interests in partnerships or joint ventures. Itemize.                                                                                                                                                                                         | X                |                                             |                                             |                                                                                                           |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.                                                                                                                                                            | X                |                                             |                                             |                                                                                                           |
| 16. | Accounts receivable.                                                                                                                                                                                                                          | X                |                                             |                                             |                                                                                                           |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.                                                                                                                          | X                |                                             |                                             |                                                                                                           |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.                                                                                                                                                                |                  |                                             |                                             |                                                                                                           |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.                                                                            | X                |                                             |                                             |                                                                                                           |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.                                                                                                                          | x                |                                             |                                             |                                                                                                           |

Sub-Total > (Total of this page)

37,800.00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the

debtor, and rights to setoff claims. Give estimated value of each.

Χ

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Mary D. Wagner | Case No. |
|-------|----------------|----------|
|       | ,              |          |

Debtor

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property                                                                                                                                                                                                                                                                        | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.                                                                                                                                                                                                                 | Х                |                                      |                                             |                                                                                                           |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.                                                                                                                                                                                                                  | X                |                                      |                                             |                                                                                                           |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                      |                                             |                                                                                                           |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.                                                                                                                                                                                                                      | 2                | 013 Nissan Sentra Sedan 4D S 14      | J                                           | 9,275.00                                                                                                  |
| 26. | Boats, motors, and accessories.                                                                                                                                                                                                                                                         | X                |                                      |                                             |                                                                                                           |
| 27. | Aircraft and accessories.                                                                                                                                                                                                                                                               | X                |                                      |                                             |                                                                                                           |
| 28. | Office equipment, furnishings, and supplies.                                                                                                                                                                                                                                            | X                |                                      |                                             |                                                                                                           |
| 29. | Machinery, fixtures, equipment, and supplies used in business.                                                                                                                                                                                                                          | X                |                                      |                                             |                                                                                                           |
| 30. | Inventory.                                                                                                                                                                                                                                                                              | X                |                                      |                                             |                                                                                                           |
| 31. | Animals.                                                                                                                                                                                                                                                                                | X                |                                      |                                             |                                                                                                           |
| 32. | Crops - growing or harvested. Give particulars.                                                                                                                                                                                                                                         | X                |                                      |                                             |                                                                                                           |
| 33. | Farming equipment and implements.                                                                                                                                                                                                                                                       | X                |                                      |                                             |                                                                                                           |
| 34. | Farm supplies, chemicals, and feed.                                                                                                                                                                                                                                                     | X                |                                      |                                             |                                                                                                           |
| 35. | Other personal property of any kind not already listed. Itemize.                                                                                                                                                                                                                        | X                |                                      |                                             |                                                                                                           |

Sub-Total > (Total of this page)

9,275.00

Total >

51,975.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

| In re | Mary D. Wagner |        | Case No |  |
|-------|----------------|--------|---------|--|
| -     | <del>_</del>   | Debtor | ,       |  |

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: ☐ Check if debtor claims a homestead exemption that exceeds (Check one box) \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3) with respect to cases commenced on or after the date of adjustment.)

| Description of Property                                                                              | Specify Law Providing<br>Each Exemption          | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|------------------------------------------------------------------------------------------------------|--------------------------------------------------|----------------------------------|-------------------------------------------------------------|
| Real Property one bedroom condo located at 453 Raintree Drive, 1L, in Glen Ellyn, IL                 | 735 ILCS 5/12-901                                | 15,000.00                        | 70,000.00                                                   |
| Checking, Savings, or Other Financial Accounts, C savings account at Citibank                        | Certificates of Deposit<br>735 ILCS 5/12-1001(b) | 2,000.00                         | 2,000.00                                                    |
| checking account at Citibank                                                                         | 735 ILCS 5/12-1001(b)                            | 800.00                           | 800.00                                                      |
| Household Goods and Furnishings miscellaneous household furniture, furnishings, goods & appliances   | 735 ILCS 5/12-1001(b)                            | 1,000.00                         | 1,000.00                                                    |
| Wearing Apparel necessary wearing apparel                                                            | 735 ILCS 5/12-1001(a)                            | 900.00                           | 900.00                                                      |
| <u>Furs and Jewelry</u><br>miscellaneous jewelry                                                     | 735 ILCS 5/12-1001(b)                            | 200.00                           | 200.00                                                      |
| Interests in Insurance Policies life insurance policy through AARP-term policy-beneficiary: Children | 215 ILCS 5/238                                   | 100%                             | 0.00                                                        |
| life insurance policy through work-term policy-<br>beneficiary: Children                             | 215 ILCS 5/238                                   | 100%                             | 0.00                                                        |
| Interests in IRA, ERISA, Keogh, or Other Pension of 401k plan through Fidelity                       | or Profit Sharing Plans<br>735 ILCS 5/12-1006    | 37,800.00                        | 37,800.00                                                   |
| Automobiles, Trucks, Trailers, and Other Vehicles<br>2013 Nissan Sentra Sedan 4D S 14                | 735 ILCS 5/12-1001(c)                            | 2,400.00                         | 9,275.00                                                    |

| Total: | 60.100.00 | 121.975.00 |
|--------|-----------|------------|

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B6D (Official Form 6D) (12/07)

| In re | Mary D. Wagner | Case No. |  |
|-------|----------------|----------|--|
| _     |                | Debtor   |  |

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu<br>H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN | CONTINGENT | UNLIQUIDAT | DISPUTED | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|------------------------------------------------------------------------------------------------------|----------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------|------------|------------|----------|----------------------------------------------------------------------|---------------------------------|
| Account No. 1147792585  Chase Auto Finance P.O. Box 9001937 Louisville, KY 40290-1937                | x        | J                      | first mortgage<br>one bedroom condo located at 453<br>Raintree Drive, 1L, in Glen Ellyn, IL                                          |            | ED         |          |                                                                      |                                 |
| Account No. <b>2500677xxxx</b>                                                                       | H        |                        | Value \$ 70,000.00<br>04/08/2013                                                                                                     | Н          |            |          | 76,000.00                                                            | 0.00                            |
| Nissan-Infiniti LT<br>P.O. Box 660366<br>Dallas, TX 75266-0366                                       | х        | J                      | Lease 2013 Nissan Sentra Sedan 4D S 14                                                                                               |            |            |          |                                                                      |                                 |
|                                                                                                      |          |                        | Value \$ 9,275.00                                                                                                                    | Ш          |            |          | 17,786.00                                                            | 0.00                            |
| Account No.                                                                                          |          |                        | Value \$                                                                                                                             |            |            |          |                                                                      |                                 |
| Account No.                                                                                          |          |                        |                                                                                                                                      |            |            |          |                                                                      |                                 |
|                                                                                                      |          |                        | Value \$                                                                                                                             |            |            |          |                                                                      |                                 |
| continuation sheets attached                                                                         |          |                        | S<br>(Total of th                                                                                                                    | ubto       |            |          | 93,786.00                                                            | 0.00                            |
|                                                                                                      |          |                        | (Report on Summary of Sc                                                                                                             | Т          | ota        | 1        | 93,786.00                                                            | 0.00                            |

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B6E (Official Form 6E) (4/13)

| In re | Mary D. Wagner | Case No. |  |
|-------|----------------|----------|--|
| _     |                | Debtor   |  |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| ·                                                                                                                                                                                                                                                                                                                                                                                       |        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.                                                                                                                                                                                                                                                                               |        |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)                                                                                                                                                                                                                                                             |        |
| ☐ Domestic support obligations                                                                                                                                                                                                                                                                                                                                                          |        |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).                                                                          | relati |
| ☐ Extensions of credit in an involuntary case                                                                                                                                                                                                                                                                                                                                           |        |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment trustee or the order for relief. 11 U.S.C. § 507(a)(3).                                                                                                                                                                | ent of |
| ☐ Wages, salaries, and commissions                                                                                                                                                                                                                                                                                                                                                      |        |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independer representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, which occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |        |
| ☐ Contributions to employee benefit plans                                                                                                                                                                                                                                                                                                                                               |        |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of by whichever occurred first, to the extent provided in 11 U.S.C. $\S$ 507(a)(5).                                                                                                                                              | ousine |
| ☐ Certain farmers and fishermen                                                                                                                                                                                                                                                                                                                                                         |        |
| Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).                                                                                                                                                                                                                                              |        |
| ☐ Deposits by individuals                                                                                                                                                                                                                                                                                                                                                               |        |
| Claims of individuals up to $\$2,775*$ for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were n delivered or provided. 11 U.S.C. $\$$ 507(a)(7).                                                                                                                                                                     | ıot    |
| ☐ Taxes and certain other debts owed to governmental units                                                                                                                                                                                                                                                                                                                              |        |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).                                                                                                                                                                                                                                                       |        |
| ☐ Commitments to maintain the capital of an insured depository institution                                                                                                                                                                                                                                                                                                              |        |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).                                                                                        | Federa |
| ☐ Claims for death or personal injury while debtor was intoxicated                                                                                                                                                                                                                                                                                                                      |        |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).                                                                                                                                                                                | r      |

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | Mary D. Wagner | Case No. | _ |
|-------|----------------|----------|---|
| _     |                | Debtor   |   |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,                             | C        | Hu | sband, Wife, Joint, or Community  | C       | Ü           | P      |                        |
|----------------------------------------------|----------|----|-----------------------------------|---------|-------------|--------|------------------------|
| MAILING ADDRESS                              |          | Н  | DATE CLAIM WAS INCURRED AND       | CONT    | N<br>L<br>I | S<br>P |                        |
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER       | B        | J  | CONSIDERATION FOR CLAIM. IF CLAIM | 1       | Q<br>U      | Ü      | AMOUNT OF CLAIM        |
| (See instructions above.)                    | O<br>R   | С  | IS SUBJECT TO SETOFF, SO STATE.   | N G E N | II          | Ė      | And Correction Certain |
|                                              | K        |    |                                   | -   ½   | D<br>A<br>T | ١٦     |                        |
| Account No. <b>00004846965xxxx</b>           |          |    |                                   | Ι'      | Ę           |        |                        |
|                                              |          |    |                                   |         | В           |        |                        |
| Barclays Bank Delaware<br>125 S. West Street |          | _  |                                   |         |             |        |                        |
| Wilmington, DE 19801                         |          | _  |                                   |         |             |        |                        |
| Wilmington, DE 19801                         |          |    |                                   |         |             |        |                        |
|                                              |          |    |                                   |         |             |        | 2 024 00               |
|                                              |          |    |                                   |         |             |        | 3,631.00               |
| Account No. 5710                             |          |    |                                   |         |             |        |                        |
|                                              |          |    |                                   |         |             |        |                        |
| Citi Diamond Preferred Card                  |          |    |                                   |         |             |        |                        |
| Citi Cards                                   |          | -  |                                   |         |             |        |                        |
| P.O. Box 6004                                |          |    |                                   |         |             |        |                        |
| Sioux Falls, SD 57117-6004                   |          |    |                                   |         |             |        |                        |
|                                              |          |    |                                   |         |             |        | 2,740.42               |
| Account No. 1305                             | $\dashv$ |    |                                   | +       |             | H      |                        |
| Account No. 1303                             |          |    |                                   |         |             |        |                        |
| Citi Thank You Preferred Card                |          |    |                                   |         |             |        |                        |
| Citi Cards                                   |          | _  |                                   |         |             |        |                        |
| P.O. Box 78045                               |          |    |                                   |         |             |        |                        |
| Phoenix, AZ 85062-8045                       |          |    |                                   |         |             |        |                        |
| 1 1100111X, A2 00002 00-10                   |          |    |                                   |         |             |        | 2,794.63               |
|                                              | _        |    |                                   | 1       |             |        | 2,7 34.03              |
| Account No. <b>542418073292xxxx</b>          |          |    |                                   |         |             |        |                        |
|                                              |          |    |                                   |         |             |        |                        |
| Citicards CBNA                               |          |    |                                   |         |             |        |                        |
| 701 E. 60th St. North                        |          | -  |                                   |         |             |        |                        |
| Sioux Falls, SD 57104                        |          |    |                                   |         |             |        |                        |
|                                              |          |    |                                   |         |             |        |                        |
|                                              |          |    |                                   |         |             |        | 4,268.00               |
|                                              |          |    |                                   | Subt    | tota        | 1      |                        |
| <b>2</b> continuation sheets attached        |          |    | (Total of t                       |         |             |        | 13,434.05              |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mary D. Wagner | Case No |  |
|-------|----------------|---------|--|
| _     |                | Debtor  |  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|                                                               |          | _  |                                   |             |             |       |                 |
|---------------------------------------------------------------|----------|----|-----------------------------------|-------------|-------------|-------|-----------------|
| CREDITOR'S NAME,                                              | C        | ŀ  | usband, Wife, Joint, or Community |             | U<br>N<br>L | P     |                 |
| MAILING ADDRESS                                               | CODEBTO  | ŀ  |                                   |             | Ľ           | SPUTE |                 |
| INCLUDING ZIP CODE,                                           | E        | V  | , DATE CLAIM WAS INCURRED AND     | T           | 1           | P     |                 |
| AND ACCOUNT NUMBER                                            | Ĭ        | J  |                                   | Ņ           | Įΰ          | Ĭ     | AMOUNT OF CLAIM |
| (See instructions above.)                                     | R        | 19 | is subject to setore, so state.   | G<br>E<br>N | ט ו         | ט ו   |                 |
| Account No. 7591                                              | T        | t  |                                   | <b>⊢</b> ۲  | ΙE          |       |                 |
|                                                               |          |    |                                   | _           | D           | 1     | 4               |
| Discover Open Road Card                                       |          | ı  |                                   |             |             |       |                 |
| P.O. Box 6103                                                 |          | -  |                                   |             |             |       |                 |
| Carol Stream, IL 60197-6103                                   |          |    |                                   |             |             |       |                 |
|                                                               |          | ı  |                                   |             |             |       |                 |
|                                                               |          |    |                                   |             |             |       | 8,610.33        |
| Account No. 4412-9701-5313-0529                               | T        | T  |                                   |             |             |       |                 |
|                                                               | 1        | l  |                                   |             |             |       |                 |
| First National Bank Omaha Visa                                |          | ı  |                                   |             |             |       |                 |
| P.O. Box 2557                                                 |          | -  |                                   |             |             |       |                 |
| Omaha, NE 68103-2557                                          |          | ı  |                                   |             |             |       |                 |
|                                                               |          | ı  |                                   |             |             |       |                 |
|                                                               |          |    |                                   |             |             |       | 954.21          |
| Account No. <b>4327-4779-0349-8705</b>                        |          | T  |                                   |             |             |       |                 |
|                                                               | 1        |    |                                   |             |             |       |                 |
| Juniper Card Services                                         |          | ı  |                                   |             |             |       |                 |
| P.O. Box 60517                                                |          | ١. |                                   |             |             |       |                 |
|                                                               |          | ı  |                                   |             |             |       |                 |
| City of Industry, CA 91716-0517                               |          | ı  |                                   |             |             |       |                 |
|                                                               |          | ı  |                                   |             |             |       |                 |
|                                                               |          |    |                                   |             |             |       | 3,574.10        |
| Account No. 0597950096                                        |          | T  |                                   |             |             | T     |                 |
|                                                               | 1        |    |                                   |             |             |       |                 |
| Kohl's                                                        |          | ı  |                                   |             |             |       |                 |
| P.O. Box 2983                                                 |          | -  |                                   |             |             |       |                 |
| Milwaukee, WI 53201-2983                                      |          | ı  |                                   |             |             |       |                 |
|                                                               |          | ı  |                                   |             |             |       |                 |
|                                                               |          |    |                                   |             |             |       | 2,917.69        |
| Account No. 9323                                              | $\vdash$ | t  |                                   | +           | t           | H     |                 |
|                                                               | 1        | l  |                                   |             |             |       |                 |
| Target Card Services                                          | 1        |    |                                   |             |             |       |                 |
| P.O. Box 660170                                               | 1        | 1_ |                                   |             |             |       |                 |
|                                                               | 1        |    |                                   |             |             |       |                 |
| Dallas, TX 75266-0170                                         | 1        |    |                                   |             |             |       |                 |
|                                                               | 1        |    |                                   |             |             |       |                 |
|                                                               |          |    |                                   |             |             |       | 2,720.81        |
| Sheet no. <b>1</b> of <b>2</b> sheets attached to Schedule of |          |    | •                                 | Sub         | tota        | al    |                 |
| Creditors Holding Unsecured Nonpriority Claims                |          |    | (Total o                          |             |             |       | 18,777.14       |
|                                                               |          |    | (101111)                          |             | 1           | ر - ی |                 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Mary D. Wagner | Case No. |  |
|-------|----------------|----------|--|
| _     |                | Debtor   |  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| _                                               |          |          |                                   |            | _                |          |                  |
|-------------------------------------------------|----------|----------|-----------------------------------|------------|------------------|----------|------------------|
| CREDITOR'S NAME,                                | CODEBTOR | Hu       | sband, Wife, Joint, or Community  | -  c       | U                | DISPUTE  |                  |
| MAILING ADDRESS                                 | Ď        | н        | DATE CLAIM WAS INCURRED AND       | N          | ŀ                | S        |                  |
| INCLUDING ZIP CODE,                             | B        | W        | CONSIDERATION FOR CLAIM. IF CLAIM | H.         | ļ                | Įΰ       | A MONTH OF CLARK |
| AND ACCOUNT NUMBER (See instructions above.)    | 0        | C        | IS SUBJECT TO SETOFF, SO STATE.   | G          | ľ                | ΙĖ       | AMOUNT OF CLAIM  |
| (See instructions above.)                       | R        | ľ        |                                   | CONTINGENT | 111              | 111      |                  |
| Account No. 4734                                |          |          |                                   | 7          | A<br>T<br>E<br>D |          |                  |
|                                                 | 1        |          |                                   | L          | D                |          |                  |
| U.S. Bank                                       | l        |          |                                   |            |                  |          |                  |
| P.O. Box 108                                    | l        | -        |                                   |            |                  |          |                  |
| Saint Louis, MO 63166-0108                      | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          | 3,820.10         |
|                                                 |          |          |                                   |            |                  |          | 3,020.10         |
| Account No. 5239-1410-3096-0334                 |          |          |                                   |            |                  |          |                  |
|                                                 | 1        |          |                                   |            |                  |          |                  |
| Walmart Mastercard/Syncb                        | l        |          |                                   |            |                  |          |                  |
| P.O. Box 960024                                 | l        | -        |                                   |            |                  |          |                  |
| Orlando, FL 32896-0024                          | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          | 6,013.11         |
|                                                 |          |          |                                   | 丄          |                  |          | 0,013.11         |
| Account No.                                     | l        |          |                                   |            |                  |          |                  |
|                                                 | 1        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 |          |          |                                   | 丄          |                  | L        |                  |
| Account No.                                     | l        |          |                                   |            |                  |          |                  |
|                                                 | 1        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | ┺        | L        |                                   | $\bot$     | 1                | _        |                  |
| Account No.                                     | 1        | 1        |                                   |            |                  |          |                  |
|                                                 | 1        | 1        |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | l        |          |                                   |            |                  |          |                  |
|                                                 | 1        | 1        |                                   |            |                  |          |                  |
|                                                 | 1        | <u> </u> |                                   |            |                  | <u>_</u> |                  |
| Sheet no. 2 of 2 sheets attached to Schedule of |          |          |                                   | Sub        |                  |          | 9,833.21         |
| Creditors Holding Unsecured Nonpriority Claims  |          |          | (Total of                         | this       | pag              | ge)      | 9,033.21         |
|                                                 |          |          |                                   | ,          | Γota             | a1       |                  |
|                                                 |          |          | /D                                |            |                  |          | 42,044.40        |
|                                                 |          |          | (Report on Summary of S           | cne        | uule             | es)      | 12,044.40        |

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B6G (Official Form 6G) (12/07)

| In re | Mary D. Wagner | Case No. |
|-------|----------------|----------|
|       |                | Debtor   |

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Nissan-Infiniti LT P.O. Box 660366 Dallas, TX 75266-0366 automobile lease

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B6H (Official Form 6H) (12/07)

| In re | Mary D. Wagner | Case No |
|-------|----------------|---------|
| _     |                |         |
|       |                | Debtor  |

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR          |
|------------------------------|---------------------------------------|
| Brian Wagner<br>379 Cottage  | Nissan-Infiniti LT<br>P.O. Box 660366 |
| Glen Ellyn, IL               | Dallas, TX 75266-0366                 |
| Donna Wagner                 | Chase Auto Finance                    |
| 521 South Washington         | P.O. Box 9001937                      |
| Westmont, IL                 | Louisville, KY 40290-1937             |
| Ed Wagner                    | Chase Auto Finance                    |
| 521 South Washington         | P.O. Box 9001937                      |
| Westmont, IL                 | Louisville, KY 40290-1937             |

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| Fill        | in this information to identify your o                                                                                                                  | case:                     |                                                     |           |       | I           |                        |                         |                                    |           |
|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-----------------------------------------------------|-----------|-------|-------------|------------------------|-------------------------|------------------------------------|-----------|
|             | otor 1 Mary D. Wa                                                                                                                                       |                           |                                                     |           |       |             |                        |                         |                                    |           |
|             | otor 2 use, if filing)                                                                                                                                  |                           |                                                     |           |       |             |                        |                         |                                    |           |
| Uni         | ted States Bankruptcy Court for the                                                                                                                     | e: NORTHERN DISTRIC       | CT OF ILLINOIS                                      |           |       |             |                        |                         |                                    |           |
|             | se number<br>nown)                                                                                                                                      |                           | -                                                   |           |       | □ A         |                        | ed filing<br>ent showir | ng post-petitio<br>following date: | •         |
| 0           | fficial Form B 6I                                                                                                                                       |                           |                                                     |           |       | M           | IM / DD/ \             | YYYY                    |                                    |           |
| S           | chedule I: Your Inc                                                                                                                                     | ome                       |                                                     |           |       |             |                        |                         |                                    | 12/1:     |
| spo<br>atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  t1: Describe Employment Fill in your employment | ır spouse is not filing w | ith you, do not inclu<br>ional pages, write yo      | de info   | mat   | ion abou    | t your sp<br>umber (if | ouse. If n<br>known).   | nore space is<br>Answer every      | needed,   |
|             | information.                                                                                                                                            |                           | Debtor 1                                            |           |       |             |                        |                         | iling spouse                       |           |
|             | If you have more than one job, attach a separate page with information about additional                                                                 | Employment status         | <ul><li>■ Employed</li><li>□ Not employed</li></ul> |           |       |             | ☐ Empl                 | employed                |                                    |           |
|             | employers.                                                                                                                                              | Occupation                | IPSR                                                |           |       |             |                        |                         |                                    |           |
|             | Include part-time, seasonal, or self-employed work.                                                                                                     | Employer's name           | Secretary of Sta                                    | ite       |       |             |                        |                         |                                    |           |
|             | Occupation may include student or homemaker, if it applies.                                                                                             | Employer's address        | 837 S. Westmor<br>Lombard, IL 601                   |           | ers F | Road        |                        |                         |                                    |           |
|             |                                                                                                                                                         | How long employed t       | here? 1 year                                        |           |       |             | _                      |                         |                                    |           |
| Par         | t 2: Give Details About Mo                                                                                                                              | nthly Income              |                                                     |           |       |             |                        |                         |                                    |           |
| Esti        | mate monthly income as of the duse unless you are separated.                                                                                            |                           | you have nothing to r                               | eport fo  | r any | line, write | e \$0 in the           | e space. Iı             | nclude your no                     | on-filing |
|             | u or your non-filing spouse have m<br>e space, attach a separate sheet to                                                                               |                           | ombine the informatio                               | n for all | emp   | loyers for  | that pers              | on on the               | lines below. If                    | you need  |
|             |                                                                                                                                                         |                           |                                                     |           |       | For Dek     | otor 1                 |                         | ebtor 2 or<br>ing spouse           |           |
| 2.          | List monthly gross wages, sala deductions). If not paid monthly,                                                                                        |                           |                                                     | 2.        | \$    | 1,          | 982.02                 | \$                      | N/A                                |           |
| 3.          | Estimate and list monthly over                                                                                                                          | time pay.                 |                                                     | 3.        | +\$   |             | 0.00                   | +\$                     | N/A                                |           |
| 4.          | Calculate gross Income. Add li                                                                                                                          | ne 2 + line 3.            |                                                     | 4.        | \$    | 1.98        | 32.02                  | \$                      | N/A                                |           |

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| Debt | or 1              | Mary D. Wagner                                                                                                                                                                                                                                                                  | _                 | С  | ase number (if kn | own)       |          |                 |                   |                 |
|------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----|-------------------|------------|----------|-----------------|-------------------|-----------------|
|      |                   |                                                                                                                                                                                                                                                                                 | -                 |    |                   |            |          |                 |                   |                 |
|      |                   |                                                                                                                                                                                                                                                                                 |                   |    | For Debtor 1      |            |          | Debtor 2        |                   |                 |
|      | Cop               | y line 4 here                                                                                                                                                                                                                                                                   | 4.                | -  | \$ 1,982          | 2.02       | \$       |                 | N/A               | ı               |
| 5.   | l ict             | all payroll deductions:                                                                                                                                                                                                                                                         |                   |    |                   |            |          |                 |                   | •               |
| J.   |                   |                                                                                                                                                                                                                                                                                 | <b>-</b> -        |    | ¢ 440             |            | æ        |                 | NI/A              |                 |
|      | 5a.<br>5b.        | Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans                                                                                                                                                                                     | 5a.<br>5b.        |    | \$\$<br>\$ 81     | .92        | \$       |                 | N/A<br>N/A        |                 |
|      | 5c.               | Voluntary contributions for retirement plans                                                                                                                                                                                                                                    | 5c.               |    | :                 | .92        | \$<br>   |                 | N/A               |                 |
|      | 5d.               | Required repayments of retirement fund loans                                                                                                                                                                                                                                    | 5d.               |    | ·                 | 0.00       | \$       |                 | N/A               |                 |
|      | 5e.               | Insurance                                                                                                                                                                                                                                                                       | 5e.               |    | : <del></del>     | 0.00       | \$       |                 | N/A               |                 |
|      | 5f.               | Domestic support obligations                                                                                                                                                                                                                                                    | 5f.               |    | ·                 | 0.00       | \$       |                 | N/A               |                 |
|      | 5g.               | Union dues                                                                                                                                                                                                                                                                      | 5g.               |    |                   | .00        | \$       |                 | N/A               |                 |
|      | 5h.               | Other deductions. Specify:                                                                                                                                                                                                                                                      | 5h.               | .+ | \$ 0              | .00        | + \$     |                 | N/A               | •               |
| 6.   | Add               | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.                                                                                                                                                                                                                      | 6.                | ;  | \$ 524            | .79        | \$       |                 | N/A               |                 |
| 7.   | Cal               | culate total monthly take-home pay. Subtract line 6 from line 4.                                                                                                                                                                                                                | 7.                | ;  | \$1,457           | <b>.23</b> | \$       |                 | N/A               |                 |
| 8.   | 8a.               | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a.               |    |                   | 0.00       | \$       |                 | N/A               |                 |
|      | 8b.               | Interest and dividends                                                                                                                                                                                                                                                          | 8b.               |    | \$0               | .00        | \$       |                 | N/A               |                 |
|      | 8c.<br>8d.<br>8e. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation Social Security                                   | 8c.<br>8d.<br>8e. |    |                   | 0.00       | \$<br>\$ |                 | N/A<br>N/A<br>N/A |                 |
|      | 8f.               | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:          | 8f.               |    | \$                | 0.00       | \$       |                 | N/A               |                 |
|      | 8g.               | Pension or retirement income                                                                                                                                                                                                                                                    | 8g.               |    |                   | .00        | \$       |                 | N/A               |                 |
|      | 8h.               | Other monthly income. Specify:                                                                                                                                                                                                                                                  | _ 8h.             | .+ | \$0               | .00        | + \$     |                 | N/A               |                 |
| 9.   | Add               | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.                                                                                                                                                                                                                            | 9.                | \$ | 1,751             | .00        | \$       |                 | N/A               |                 |
| 10.  | Cal               | culate monthly income. Add line 7 + line 9.                                                                                                                                                                                                                                     | 10.               | \$ | 3,208.23          | + \$       |          | N/A             | = \$              | 3,208.23        |
|      | Add               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.                                                                                                                                                                                                          |                   | _  |                   | -          |          |                 | -                 | -,              |
| 11.  | Inclu<br>othe     | te all other regular contributions to the expenses that you list in Schedule dude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:          | depe              |    |                   |            |          | Schedule<br>11. |                   | 0.00            |
| 12.  |                   | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes                                                                                                                        |                   |    |                   |            |          | 12.             | \$                | 3,208.23        |
|      |                   |                                                                                                                                                                                                                                                                                 |                   |    |                   |            |          |                 | Combir<br>monthly | ied<br>y income |
| 13.  |                   | you expect an increase or decrease within the year after you file this form                                                                                                                                                                                                     | ?                 |    |                   |            |          |                 |                   |                 |
|      |                   | No.                                                                                                                                                                                                                                                                             |                   |    |                   |            |          |                 |                   |                 |
|      |                   | Yes Explain:                                                                                                                                                                                                                                                                    |                   |    |                   |            |          |                 |                   |                 |

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|        | n this informa              | ation to identify w   | our casa          |                                                            |                                         | 1                |                                    |                               |
|--------|-----------------------------|-----------------------|-------------------|------------------------------------------------------------|-----------------------------------------|------------------|------------------------------------|-------------------------------|
|        |                             | ation to identify y   |                   |                                                            |                                         |                  |                                    |                               |
| Debt   | tor 1                       | Mary D. Wag           | jner              |                                                            |                                         |                  | eck if this is:  An amended filing |                               |
| Debt   | tor 2                       |                       |                   |                                                            |                                         |                  | 0                                  | wing post-petition chapter    |
| 1      | use, if filing)             | -                     |                   |                                                            |                                         |                  |                                    | the following date:           |
| Unite  | ed States Bank              | ruptcy Court for the: | : NORTH           | IERN DISTRICT OF ILLIN                                     | OIS                                     |                  | MM / DD / YYYY                     |                               |
| Case   | e number                    |                       |                   |                                                            |                                         |                  | A separate filing fo               | or Debtor 2 because Debto     |
| (If kn | nown)                       |                       |                   |                                                            |                                         |                  | 2 maintains a sepa                 | arate household               |
| Of     | ficial Fo                   | orm B 6J              |                   |                                                            |                                         | •                |                                    |                               |
|        |                             | J: Your               | _<br>Evner        | 1606                                                       |                                         |                  |                                    | 12/1:                         |
|        |                             |                       |                   | ISCS  If two married people a                              | re filing together. b                   | oth are ec       | uually responsible f               |                               |
| info   | rmation. If n               | nore space is ne      | eded, atta        | ach another sheet to this                                  | form. On the top of                     | f any addi       | tional pages, write                | your name and case            |
| nun    | nber (if know               | n). Answer eve        | ry questio        | n.                                                         |                                         |                  |                                    |                               |
| Part   |                             | ribe Your House       | hold              |                                                            |                                         |                  |                                    |                               |
| 1.     | Is this a joi               |                       |                   |                                                            |                                         |                  |                                    |                               |
|        | ■ No. Go to                 |                       | in a canar        | ate household?                                             |                                         |                  |                                    |                               |
|        | _                           |                       | ın a separ        | ate nousenoid?                                             |                                         |                  |                                    |                               |
|        |                             |                       | st file a se      | parate Schedule J.                                         |                                         |                  |                                    |                               |
|        |                             |                       |                   |                                                            |                                         |                  |                                    |                               |
| 2.     | Do you hav                  | e dependents?         | ■ No              |                                                            |                                         |                  |                                    |                               |
|        | Do not list D               |                       | ☐ Yes.            | Fill out this information for each dependent               | Dependent's relation Debtor 1 or Debtor |                  | Dependent's<br>age                 | Does dependent live with you? |
|        | Do not state                |                       |                   |                                                            |                                         |                  |                                    | □ No                          |
|        | dependents                  | ' names.              |                   |                                                            |                                         |                  |                                    | ☐ Yes                         |
|        |                             |                       |                   |                                                            |                                         |                  |                                    | □ No                          |
|        |                             |                       |                   |                                                            |                                         |                  |                                    | ☐ Yes                         |
|        |                             |                       |                   |                                                            |                                         |                  |                                    | □ No                          |
|        |                             |                       |                   |                                                            |                                         |                  |                                    | ☐ Yes                         |
|        |                             |                       |                   |                                                            |                                         |                  |                                    | □ No                          |
| 3.     | Do vour ex                  | penses include        | _                 | NI.                                                        |                                         |                  |                                    | ☐ Yes                         |
| o.     | expenses of                 | f people other t      | :han $_{\square}$ | No<br>Yes                                                  |                                         |                  |                                    |                               |
|        | yourself an                 | d your depende        | nts?              | res                                                        |                                         |                  |                                    |                               |
| Part   | 2: Estim                    | nate Your Ongoi       | ing Month         | ly Expenses                                                |                                         |                  |                                    |                               |
|        | mate your e                 | xpenses as of y       | our bankr         | uptcy filing date unless y                                 |                                         |                  |                                    |                               |
|        | enses as of a licable date. |                       | bankrupto         | y is filed. If this is a supp                              | olemental <i>Schedule</i>               | <i>J</i> , check | the box at the top                 | of the form and fill in the   |
|        |                             |                       |                   |                                                            |                                         |                  |                                    |                               |
|        |                             |                       |                   | government assistance i<br>cluded it on <i>Schedule I:</i> |                                         |                  |                                    |                               |
|        | icial Form 6                |                       | a nave in         | ciadea it on ochedale i.                                   | rour income                             |                  | Your exp                           | enses                         |
| 4.     | The rental (                | or home owners        | hin avnar         | ses for your residence.                                    | naluda firet martaaa                    | 0                |                                    |                               |
| 4.     |                             | nd any rent for th    |                   |                                                            | ncidde iirst mortgagi                   | 4.               | \$                                 | 602.15                        |
|        | If not include              | ded in line 4:        |                   |                                                            |                                         |                  |                                    |                               |
|        | 4a. Real                    | estate taxes          |                   |                                                            |                                         | 4a.              | \$                                 | 0.00                          |
|        |                             | erty, homeowner's     | s, or renter      | 's insurance                                               |                                         | 4b.              | ·                                  | 0.00                          |
|        |                             |                       |                   | upkeep expenses                                            |                                         | 4c.              |                                    | 95.00                         |
| _      |                             | eowner's associa      |                   |                                                            |                                         | 4d.              | \$                                 | 291.75                        |
| 5.     | Additional                  | mortgage payme        | ents for vo       | <b>our residence</b> , such as ho                          | me equity loans                         | 5.               | S                                  | 0.00                          |

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| Deb | otor 1        | Mary D. Wagner                                                                                                                                                                                                             | Case num  | nber (if known) |                            |
|-----|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------|----------------------------|
| 6.  | Utiliti       | ies:                                                                                                                                                                                                                       |           |                 |                            |
|     | 6a.           | Electricity, heat, natural gas                                                                                                                                                                                             | 6a.       | \$              | 250.00                     |
|     | 6b.           | Water, sewer, garbage collection                                                                                                                                                                                           | 6b.       | \$              | 0.00                       |
|     | 6c.           | Telephone, cell phone, Internet, satellite, and cable services                                                                                                                                                             | 6c.       | \$              | 150.00                     |
|     | 6d.           | Other. Specify:                                                                                                                                                                                                            | 6d.       | \$              | 0.00                       |
| 7.  | Food          | and housekeeping supplies                                                                                                                                                                                                  |           | \$              | 450.00                     |
| 8.  | Child         | Icare and children's education costs                                                                                                                                                                                       | 8.        | \$              | 0.00                       |
| 9.  | Cloth         | ning, laundry, and dry cleaning                                                                                                                                                                                            | 9.        | \$              | 95.00                      |
| 10. | Perso         | onal care products and services                                                                                                                                                                                            | 10.       | \$              | 85.00                      |
| 11. | Medi          | cal and dental expenses                                                                                                                                                                                                    | 11.       | \$              | 150.00                     |
| 12. | Trans         | sportation. Include gas, maintenance, bus or train fare.                                                                                                                                                                   |           |                 |                            |
|     |               | ot include car payments.                                                                                                                                                                                                   | 12.       | \$              | 375.00                     |
| 13. | Ente          | rtainment, clubs, recreation, newspapers, magazines, and books                                                                                                                                                             | 13.       | \$              | 80.00                      |
| 14. | Char          | itable contributions and religious donations                                                                                                                                                                               | 14.       | \$              | 75.00                      |
| 15. | Insur         |                                                                                                                                                                                                                            |           |                 |                            |
|     |               | ot include insurance deducted from your pay or included in lines 4 or 20.                                                                                                                                                  |           | _               |                            |
|     |               | Life insurance                                                                                                                                                                                                             | 15a.      | ·               | 50.00                      |
|     |               | Health insurance                                                                                                                                                                                                           | 15b.      |                 | 188.00                     |
|     | 15c.          | Vehicle insurance                                                                                                                                                                                                          | 15c.      | \$              | 70.00                      |
|     |               | Other insurance. Specify:                                                                                                                                                                                                  | 15d.      | \$              | 0.00                       |
| 16. | Taxe:<br>Spec | <ul> <li>S. Do not include taxes deducted from your pay or included in lines 4 or 20.</li> <li>ify:</li> </ul>                                                                                                             | 16.       | \$              | 0.00                       |
| 17. |               | Ilment or lease payments:                                                                                                                                                                                                  |           |                 |                            |
|     |               | Car payments for Vehicle 1                                                                                                                                                                                                 | 17a.      | · -             | 199.00                     |
|     |               | Car payments for Vehicle 2                                                                                                                                                                                                 | 17b.      | ·               | 0.00                       |
|     |               | Other. Specify:                                                                                                                                                                                                            | 17c.      | · -             | 0.00                       |
|     |               | Other. Specify:                                                                                                                                                                                                            | 17d.      | \$              | 0.00                       |
| 18. |               | payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, <i>Schedule I</i> , <i>Your Income</i> (Official Form 6I).                                                          | 18.       | \$              | 0.00                       |
| 19. | Othe          | r payments you make to support others who do not live with you.                                                                                                                                                            |           | \$              | 0.00                       |
|     | Spec          | ify:                                                                                                                                                                                                                       | 19.       |                 |                            |
| 20. |               | r real property expenses not included in lines 4 or 5 of this form or on Sche                                                                                                                                              | dule I: Y | our Income.     |                            |
|     | 20a.          | Mortgages on other property                                                                                                                                                                                                | 20a.      |                 | 0.00                       |
|     | 20b.          | Real estate taxes                                                                                                                                                                                                          | 20b.      | ·               | 0.00                       |
|     |               | Property, homeowner's, or renter's insurance                                                                                                                                                                               | 20c.      | \$              | 0.00                       |
|     | 20d.          | Maintenance, repair, and upkeep expenses                                                                                                                                                                                   | 20d.      | \$              | 0.00                       |
|     | 20e.          | Homeowner's association or condominium dues                                                                                                                                                                                | 20e.      | \$              | 0.00                       |
| 21. | Othe          | r: Specify:                                                                                                                                                                                                                | 21.       | +\$             | 0.00                       |
| 22. |               | monthly expenses. Add lines 4 through 21.                                                                                                                                                                                  | 22.       | \$              | 3,205.90                   |
| 22  |               | esult is your monthly expenses. ulate your monthly net income.                                                                                                                                                             |           |                 |                            |
| ۷٥. |               | Copy line 12 (your combined monthly income) from Schedule I.                                                                                                                                                               | 23a.      | <b>\$</b>       | 3,208.23                   |
|     |               | Copy your monthly expenses from line 22 above.                                                                                                                                                                             | 23b.      | ·               |                            |
|     | 230.          | copy your monthly expenses from line 22 above.                                                                                                                                                                             | 230.      | -φ              | 3,205.90                   |
|     | 23c.          | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .                                                                                                                    | 23c.      | \$              | 2.33                       |
| 24. | For ex        | <b>bu expect an increase or decrease in your expenses within the year after you</b> cample, do you expect to finish paying for your car loan within the year or do you expect your m cation to the terms of your mortgage? |           |                 | e or decrease because of a |
|     | ■ No          | D                                                                                                                                                                                                                          |           |                 |                            |
|     | □Y€           | es.                                                                                                                                                                                                                        |           |                 |                            |
|     | Expla         |                                                                                                                                                                                                                            |           |                 |                            |

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**B6 Declaration (Official Form 6 - Declaration).** (12/07)

# **United States Bankruptcy Court** Northern District of Illinois

| In re | Mary D. Wagner                                                                |           |                                          | Case No.  |      |
|-------|-------------------------------------------------------------------------------|-----------|------------------------------------------|-----------|------|
|       |                                                                               |           | Debtor(s)                                | Chapter   | 7    |
|       | DECLARATION (                                                                 | CONCERN   | IING DEBTOR'S SO                         | CHEDUL    | ES   |
|       | DECLARATION UNDER                                                             | PENALTY ( | OF PERJURY BY INDIV                      | IDUAL DEI | BTOR |
|       | I declare under penalty of perjury to of18 sheets, and that they are true and |           |                                          |           |      |
| Date  | November 19, 2015                                                             | Signature | /s/ Mary D. Wagner Mary D. Wagner Debtor |           |      |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

# United States Bankruptcy Court Northern District of Illinois

| In re | Mary D. Wagner |           | Case No. |   |
|-------|----------------|-----------|----------|---|
|       |                | Debtor(s) | Chapter  | 7 |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$19,050.73 2015 year to date income

\$12,571.00 2014 income \$15,639.00 2013 income

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$19,261.00 2015 year to date social security income

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**AMOUNT** SOURCE

\$21,897.00 2014 social security income \$21,551.00 2013 social security income

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

> **AMOUNT** DATES OF PAID OR PAYMENTS/ VALUE OF

NAME AND ADDRESS OF CREDITOR

**TRANSFERS** 

**TRANSFERS** 

AMOUNT STILL OWING

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Kaplan Bankruptcy Firm, LLC 25 East Washington St Suite 1501 Chicago, IL 60602 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR November 13, 2015 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$1,000.00-Attorney Fee
\$335.00-Filing Fee

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#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

E NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

**BEGINNING AND** NATURE OF BUSINESS **ENDING DATES** 

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

**ADDRESS** NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None 1

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

## 21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

**ADDRESS** 

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

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#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

Debtor

Mary D. Wagner

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

# **United States Bankruptcy Court**Northern District of Illinois

|                                        |                                                                                                       | 1 (of the H Dis                                     | trict of immorp                                                      |                                  |                                        |
|----------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------|----------------------------------|----------------------------------------|
| In re                                  | Mary D. Wagner                                                                                        |                                                     |                                                                      | Case No.                         |                                        |
|                                        |                                                                                                       | Ľ                                                   | Debtor(s)                                                            | Chapter                          | 7                                      |
| )                                      |                                                                                                       | DIVIDUAL DEBTO                                      |                                                                      |                                  |                                        |
| 'ART                                   | <b>A</b> - Debts secured by property of property of the estate. Attach ad                             |                                                     |                                                                      | ed for <b>EAC</b> I              | debt which is secured by               |
| Droper                                 | ty No. 1                                                                                              | iditional pages if fiec                             | essary.)                                                             |                                  |                                        |
| Порсі                                  | 19 110. 1                                                                                             |                                                     |                                                                      |                                  |                                        |
| Chase Auto Finance                     |                                                                                                       | Describe Property Sone bedroom condo Glen Ellyn, IL |                                                                      | :<br>53 Raintree Drive, 1L, in   |                                        |
| Proper                                 | ty will be (check one):                                                                               |                                                     |                                                                      |                                  |                                        |
| Î 🗆                                    | Surrendered                                                                                           | ■ Retained                                          |                                                                      |                                  |                                        |
| ■                                      | ning the property, I intend to (check a Redeem the property Reaffirm the debt Other. Explain          |                                                     | id lien using 11 U.S.C.                                              | § 522(f)).                       |                                        |
| Proper                                 | ty is (check one):                                                                                    |                                                     |                                                                      |                                  |                                        |
| _                                      | Claimed as Exempt                                                                                     |                                                     | ☐ Not claimed as exe                                                 | mpt                              |                                        |
| Proper                                 | ty No. 2                                                                                              |                                                     |                                                                      |                                  |                                        |
| Creditor's Name:<br>Nissan-Infiniti LT |                                                                                                       |                                                     | Describe Property Securing Debt:<br>2013 Nissan Sentra Sedan 4D S 14 |                                  |                                        |
| -                                      | ty will be (check one):<br>Surrendered                                                                | ■ Retained                                          |                                                                      |                                  |                                        |
|                                        | ning the property, I intend to (check a<br>Redeem the property<br>Reaffirm the debt<br>Other. Explain |                                                     | id lien using 11 U.S.C.                                              | § 522(f)).                       |                                        |
|                                        | ry is (check one):<br>Claimed as Exempt                                                               |                                                     | ☐ Not claimed as exe                                                 | mpt                              |                                        |
| Attach a                               | B - Personal property subject to unexpanditional pages if necessary.)  by No. 1                       | pired leases. (All three                            | columns of Part B mus                                                | st be complete                   | ed for each unexpired lease.           |
|                                        | 's Name:<br>-Infiniti LT                                                                              | Describe Leased Pro<br>automobile lease             | perty:                                                               | Lease will be U.S.C. § 365 ■ YES | e Assumed pursuant to 11 (p)(2):  □ NO |

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Page 2

|      | are under penalty of perjury that<br>nal property subject to an unexpi | •         | y intention as to any property of my estate securing a debt and/or |
|------|------------------------------------------------------------------------|-----------|--------------------------------------------------------------------|
| Date | November 19, 2015                                                      | Signature | /s/ Mary D. Wagner                                                 |
|      |                                                                        |           | Mary D. Wagner                                                     |
|      |                                                                        |           | Debtor                                                             |

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# **United States Bankruptcy Court** Northern District of Illinois

| In r | e Mary D. Wagner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                        | Case No.                                                |                                     |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|---------------------------------------------------------|-------------------------------------|
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Debtor(s)                                                                              | Chapter                                                 | 7                                   |
|      | DISCLOSURE OF COMPENSAT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | TION OF ATTORN                                                                         | EY FOR DE                                               | CBTOR(S)                            |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | e petition in bankruptcy, or                                                           | agreed to be paid                                       | to me, for services rendered or to  |
|      | For legal services, I have agreed to accept                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                        | \$                                                      | 1,000.00                            |
|      | Prior to the filing of this statement I have received                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                        | \$                                                      | 1,000.00                            |
|      | Balance Due                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                        | \$                                                      | 0.00                                |
| 2.   | \$335.00_ of the filing fee has been paid.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                        |                                                         |                                     |
| 3.   | The source of the compensation paid to me was:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                        |                                                         |                                     |
|      | ■ Debtor □ Other (specify):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                        |                                                         |                                     |
| 4.   | The source of compensation to be paid to me is:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                        |                                                         |                                     |
|      | ■ Debtor □ Other (specify):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                        |                                                         |                                     |
| 5.   | ■ I have not agreed to share the above-disclosed compensation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | on with any other person unl                                                           | ess they are meml                                       | pers and associates of my law firm. |
|      | ☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of the same of the s  |                                                                                        |                                                         |                                     |
| 6.   | In return for the above-disclosed fee, I have agreed to render le                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | gal service for all aspects of                                                         | f the bankruptcy c                                      | ase, including:                     |
|      | <ul> <li>a. Analysis of the debtor's financial situation, and rendering act</li> <li>b. Preparation and filing of any petition, schedules, statement of</li> <li>c. Representation of the debtor at the meeting of creditors and</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors for reaffing pursuant to 11 USC 522(f)(2)(A) for avoidance</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | of affairs and plan which ma<br>confirmation hearing, and a<br>rmations; exemption pla | ny be required;<br>nny adjourned hea<br>anning; prepara | rings thereof;                      |
| 7.   | By agreement with the debtor(s), the above-disclosed fee does not recommend to the Redemptions under 11 U.S.C. 722, representation avoidances, relief from stay actions, any adversarial statement of the Redemption of the Redempti | tion of the debtors in a                                                               | ny dischargeab                                          |                                     |
|      | CEI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | RTIFICATION                                                                            |                                                         |                                     |
| this | I certify that the foregoing is a complete statement of any agree bankruptcy proceeding.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ment or arrangement for pay                                                            | ment to me for re                                       | presentation of the debtor(s) in    |
| Date | ed: November 19, 2015                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | /s/ Rae Kaplan                                                                         |                                                         |                                     |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Rae Kaplan                                                                             | Fi 110                                                  |                                     |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Kaplan Bankruptcy<br>25 East Washington                                                |                                                         |                                     |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Suite 1501                                                                             | · = •                                                   |                                     |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Chicago, IL 60602<br>(312) 294-8989 Fax                                                | : (312) 294-899                                         | 5                                   |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | rkaplan@financialre                                                                    |                                                         |                                     |

# KAPLAN BANKRUPTCY FIRM, L.L.C.

# CHAPTER 7 PIF ENGAGEMENT AGREEMENT

Mary D. Wagner

(the "Client" or "you"), by entering into this "PIF Engagement Agreement" hereby engages and retains Kaplan Bankruptcy Law, L.L.C., a debt relief agency and law firm (the "Law Firm"), solely to represent the Client (i) to evaluate the Client's financial circumstances, (ii) to explain to the Client the Client's options which may be available to the Client considering such financial circumstances including but not limited to the filing with the Clerk of the Bankruptcy Court a petition (the "Petition") for relief under chapter 7 or chapter 13 of Title 11 U.S.C. (the "Bankruptcy Code") in the United States Bankruptcy Court for the Northern District of Illinois (Client's "Bankruptcy Case"), and (iii) if the Client after consultation with the Law Firm determines in its sole discretion that it is in the Client's best interests, to file a chapter 7 Petition on behalf of the Client and prosecute and conclude Client's chapter 7 Bankruptcy Case.

#### Article 1. The Law Firm's Duties

- 1.1 The Law Firm shall investigate and advise the Client regarding its interests. The Client understands and acknowledges to the Law Firm that the Client's Bankruptcy Case may be complex, and that the Law Firm's investigation of and work on the Client's Bankruptcy Case shall not commence until the Client signs, dates and delivers this PIF Engagement Agreement to the Law Firm. Therefore, the Client also understands and acknowledges to the Law Firm that discovery in the Client's Bankruptcy Case and/or other future events may change the Law Firm's advice regarding the Client's Interests, perhaps in a significant or material way. The Law Firm is not obligated to begin or to continue to prosecute or defend any claim that in the Law Firm's sole professional judgment is or becomes objectively or subjectively frivolous, can only be brought in bad faith, or whose continued prosecution comes to or may constitute bad faith, violates or comes to or may violate any rule or code of professional ethics, or has or comes to or may have so little chance of success on the merits that it is not reasonable to expect the Law Firm to continue to invest its time and effort to further prosecute the Client's Bankruptcy Case.
- 1.2 The Law Firm is specifically under no obligation to prosecute or to defend any appeal or adversary action by reason of this PIF Engagement Agreement.

#### **Article 2. Professional Fees and Costs**

- 2.1 The Client shall pay to the Law Firm, prior to the Law Firm commencing any work on the Client's behalf, professional trees in the amount of \$1,000.00 (Clients Initials:

  The professional fees described above do not include court costs payable by the Client in the amount of \$355.00, or such other amount of court costs as shall be established under the Bankruptcy Code or rules promulgated thereunder from time to time.
- 2.2 The fees include consulting with the Client to discuss the Client's financial condition and possible solutions; preparing, filing and amending the Client's bankruptcy schedules and all documents required to be filed by the Bankruptcy Code; appearing at the Client's 341 Meeting of Creditors; processing reaffirmation agreements with the Client's secured creditors; providing the sections 342(b)(1), 527 and 521 notices which are attached hereto; and corresponding with the Trustee assigned to the case. This fee expressly does not include any obligation on the Law Firm to prosecute or defend any and/or all contested motions and/or any and all adversary proceedings ("Additional Services"), which may arise as a result of the Client's bankruptcy case. Anything herein to the contrary, both the Law Firm and the Client will endeavor to be fair and reasonable with each other in all billing matters.
- 2.3 All retainers described herein, including all future retainers, are expressly agreed to be "advance payment retainers" as described in In re: Production Associates, Ltd. 264 B.R. 180 (Bkrtcy. N.D.III 2001) and Dowling v. Chicago Options Associates, Inc., 2007 WL 128879 (III.). The Law Firm will commingle the retainer and any future retainer immediately upon receipt with their general funds being obligated only to refund an amount equal to the unearned portion thereof, if any, promptly after the termination of the Law Firm's services. Ordinarily, Client has the option to request that the retainer be considered a "security retainer" where Client continues to have an interest in the funds, but Client recognizes and agrees that the Law Firm would not undertake the representation on that basis. The Law Firm is obligated by the Dowling case to advise Client of the reason they would decline to represent Client on a security retainer basis, and that reason is the Law Firm does not desire to potentially compete with the creditors of the Client on a security retainer basis.
- 2.4 Compensation will be paid to the Law Firm at their customary hourly rates for all Additional Services (including all para-professional staff) as they exist from time to time.

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The rates are currently \$300 per hour for attorney's time, and \$95 per hour for para-professional's time. In addition, if for any reason the attorney-client relationship is terminated by either of the Parties, then upon such termination the Law Firm will prepare an accounting and forward the same to the Client and charge the Client on an hourly basis for all time expended by the Law Firm up until the time of termination, including the preparation of the accounting.

- 2.5 All expenses incurred, and disbursements made by the Law Firm on the Client's behalf in connection with this matter will be payable by the Client in addition to the professional fees. Such expenses typically include, but are not limited to: tax transcripts, credit reports, long distance telephone calls, photocopying, messengers, and regular and electronic mail services. The foregoing list is by way of example only, and the omission of any charge, expense, or disbursement from said list is not intended as a limitation for such possible charges. The Law Firm will generally bill the Client for such costs once a month unless the costs incurred are so insignificant as not to justify a billing. In the case of any cost the Law Firm deem exceptional in their sole discretion, the Law Firm may request payment in advance or payment directly from the Client to the provider.
- 2.6 If the Client specifically objects in writing to any charge appearing on any bill rendered by the Law Firm, the Client will pay within one month of the date of any bill any and all charges to which the Client does not specifically object in writing. The Law Firm is always willing to discuss its charges with the Client, but the Client agrees that any fee or expense to which the Client does not object in writing to the Law Firm within one month of the date thereof shall constitute an "account stated" and the Client shall no longer be entitled to dispute the same. The reason for setting this deadline is to keep any objections (and the memories that underlie them for all the Parties) from becoming stale, and to encourage the Client to bring any billing controversies to the Law Firm's attention as soon as possible to foster a speedy resolution thereof.

### Article 3. The Law Firm's Authority To Act

3.1 In matters of professional responsibility, the Law Firm shall act in their own discretion as they deem proper under the applicable rules of court and the Illinois Code of Professional Responsibility and the Rules of any Court in which the case is prosecuted, and without any direction from the Client.

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- 3.2 The Client recognizes that the Law Firm possesses special skills and training in legal matters which the Client does not possess or are beyond the Client's knowledge and skill. Accordingly, where and to the extent appropriate, the Law Firm shall take direction from the Client upon the Client's written demand but only where and to the extent the same do not impinge upon the Law Firm's professional responsibilities and legal judgment, or where a full consultation with the Client regarding the same is not practical given relevant circumstances and/or timing.
- 3.3 Nothing herein shall be construed to limit the Law Firm's responsibilities under the Illinois Code of Professional Responsibility, but it is the Parties' desire that the provisions hereof be interpreted to the greatest extent possible to conform to said Illinois Code of Professional Responsibility.

#### **Article 4. Contract Construction**

- 4.1 This PIF Engagement Agreement shall be construed under a rule of reasonableness at the time it was entered, examining any provision thereof with a mind that the Parties hereto were acting in good faith and without oppression, attempting to reach a fair and equitable means on which the Law Firm could pursue the Client's Interests for the Client
- 4.2 This PIF Engagement Agreement shall be construed according to the laws of the State of Illinois and the Parties agree to submit to the jurisdiction of any State Court in the Circuit Court of Cook County.
- 4.3 Subject to any rule, procedure or court order that is adopted by the courts in this jurisdiction which are expressly incorporated by reference into this PIF Engagement Agreement and made a part hereof, the Parties acknowledge that this PIF Engagement Agreement embodies the full understanding of the Parties hereto and is a fully integrated agreement that may only be altered or amended by a writing signed by both Parties.

# Article 5. Legal Advice Regarding This PIF Engagement Agreement

5.1 The Law Firm is not representing the Client regarding the Client entering into this PIF Engagement Agreement, nor is the Law Firm rendering any legal advice to the Client regarding the same. The Client acknowledges that the Law Firm has recommended to and advised the Client that the

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Client should retain the Client's own independent legal advice from legal counsel other than the Law Firm regarding the Clients entering into this PIF Engagement Agreement with the Law Firm, and that the Client has indeed obtained such independent legal advice or has knowingly waived the Client's right, and the Firm's advice to the Client, to obtain such independent advice from legal counsel other than the Firm.

### Article 6. General; Client Disclosures

- 6.1 Either party may terminate Client's engagement of the Law Firm but only by giving written notice to the other party at the designated or last known address of the party receiving such termination notice, subject in the case of the Firm terminating engagement to the Firm's compliance with any applicable rules or codes of professional ethics and responsibilities.
- 6.2 In addition to paying the Firm's fees and all other costs set forth in the PIF Engagement Agreement, the Client also agrees: to carry out all of the Client's obligations pursuant to section 521 of the Bankruptcy Code; to provide the Law Firm full, honest and accurate disclosures of all the Client's assets, liabilities and financial information; to notify the Law Firm of any change or anticipated change in the Client's circumstances; and to comply with applicable law.
- 6.3 Disclosure Pursuant to 11 U.S.C. &527(a)(2).
  - a) All information that you are required to provide with a petition and thereafter during a case under the Bankruptcy Code is required to be complete, accurate, and truthful. This is solely your responsibility.
  - b) All assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case. The Bankruptcy Code requires that you list the replacement value of each asset. This must be the replacement value of the property at the date of filing the petition, without deducting for costs of sale or marketing, established after a reasonable inquiry. For property acquired for personal, family or household use, replacement value means the price a retail merchant would charge for property of that kind, considering the age and condition of the property. This is solely your responsibility.
  - The following information, which appears on Official Form 22, Statement of Current Monthly

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- Income is required to be stated after the reasonable inquiry: current monthly income, the amounts specified in section 707(b)(2), and, in a case under chapter 13 of the Bankruptcy Code, disposable income (determined in accordance with section 707(b)(2). This is solely your responsibility.
- d) Information that you provide during your case may be audited pursuant to provisions of the Bankruptcy Code. Failure to provide such information may result in dismissal of the case under this title or other sanction, including criminal sanctions. This is solely your responsibility.
- e) By signing below, you acknowledge that the Law Firm has fully explained your obligations set forth above to you, you have had the opportunity to ask the Law Firm questions and receive answers about such obligations and you fully understand your obligations set forth above.
- 6.4 Attorneys of the Law Firm reserve the right to refuse executing a reaffirmation agreement for any type of secured property (including but not limited to real estate and motor vehicles) if, at attorney's sole discretion, the attorney believes executing such an agreement would be detrimental to the Client.

# **Article 7. Required Disclosures**

- 7.1 Under the bankruptcy laws, the Client is required to take a Credit Counseling Course prior to the filing of the Client's bankruptcy petition and a Financial Management Course prior to the discharge of the Client's bankruptcy. If the Client fails to complete these courses the Client's bankruptcy discharge will be denied.
- 7.2 Section 527 of the Bankruptcy Code requires a debt relief agency to provide an assisted person with the following: A copy of the notice prepared by the clerk of the Bankruptcy Court, in accordance with the requirements of § 342(b), which the Client has been shown at the Client's initial consultation and which contains a brief description of Chapters 7, 11, 12, and 13 and the general purpose, benefits, and costs of proceeding under each of those chapters; and the types of services available from credit counseling agencies; specifying that a person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury in connection

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with a case under this title shall be subject to fine, imprisonment, or both; and that all information supplied by a debtor in connection with a case under this title is subject to examination by the Attorney General.

7.3 All information that the assisted person is required to provide with a petition and thereafter during a case under this title is required to be complete, accurate, and truthful; all assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in § 506 must be stated in those documents where requested after reasonable inquiry to establish such value; current monthly income, the amounts specified in section 707(b)(2), and, in a case under Chapter 13 of this title, disposable income (determined in accordance with § 707(b)(2)) are required to be stated after reasonable inquiry; and information that an assisted person provides during his or her case may be audited pursuant to this title, and failure to provide such information may result in dismissal of the case under this title or other sanction, including a criminal sanction.

7.4 If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. The law requires an attorney or bankruptcy petition preparer to give you a written contract specifying what the attorney or bankruptcy petition preparer will do for you and how much it will cost. Obtain a copy of and carefully review the contract before you hire anyone. The following information explains what must be done in a routine bankruptcy case to help you evaluate how much service you need. Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and decide which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents must be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you must attend the required first meeting of creditors, where you may be questioned by a court official called a "trustee" and by creditors. If you choose to file a Chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts. If you choose to file a Chapter 13 case, in which you repay your creditors what you can afford over 3 to 5 years, you may also want help preparing your Chapter 13 plan and

with the confirmation hearing on your plan, which will be before a bankruptcy judge. If you select another type of relief under the Bankruptcy Code other than Chapter 7 or Chapter 13, you should consult someone familiar with that type of relief. Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only lawyers, not bankruptcy petition preparers, can give you legal advice in that regard.

7.5 You must accurately disclose your average monthly income and expenses. To compile your income refer to recent paystubs accounting for all income. Review your monthly expenditures and make your best estimate on cash expenditures. If you are required to pass a "means test" because of your income, your estimated monthly expenses will be based upon IRS allowances based on the area in which you live. If your expenses exceed the allotted amounts, you may need to make adjustments accordingly. When you value your property, consider the prices for housing in your area, in newspapers for automobiles, and what you would pay for furniture and clothes at stores selling such goods. If you have an item of unique or special value, an appraisal may be necessary. When listing creditors, base information concerning the creditor on the most current bill or invoice. Some of your property is exempt and may be retained according to the exemptions that the Law Firm has reviewed at your consultation. If a creditor has a lien on exempt property, the lien may be avoidable, or you may have to pay to keep the property.

| AGREED AND ACKNOWLEDGED BY CLIENT: |  |
|------------------------------------|--|
| DEPTOR: Malanely                   |  |
| Print Name: Mary D. Wagner         |  |
| Date: November 13, 2015            |  |
| JOINT DEBTOR:                      |  |
| Print Name:                        |  |
| Date:                              |  |
|                                    |  |

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

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a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

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B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court Northern District of Illinois**

|               | No                                            | orthern District of Illinois                                  |                    |                            |
|---------------|-----------------------------------------------|---------------------------------------------------------------|--------------------|----------------------------|
| In re Ma      | ry D. Wagner                                  |                                                               | Case No.           |                            |
|               |                                               | Debtor(s)                                                     | Chapter            | 7                          |
|               |                                               | F NOTICE TO CONSUME<br>b) OF THE BANKRUPTC                    | ,                  | S)                         |
| I (V<br>Code. | We), the debtor(s), affirm that I (we) have r | Certification of Debtor received and read the attached notice | ce, as required by | § 342(b) of the Bankruptcy |
| Mary D. Wa    | igner                                         | $\chi$ /s/ Mary D. Wagi                                       | ner                | November 19, 2015          |
| Printed Nan   | ne(s) of Debtor(s)                            | Signature of Deb                                              | tor                | Date                       |
| Case No. (it  | f known)                                      | X                                                             |                    |                            |
|               |                                               | Signature of Join                                             | t Debtor (if any)  | Date                       |
|               |                                               |                                                               |                    |                            |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# **United States Bankruptcy Court** Northern District of Illinois

| In re | Mary D. Wagner                             |                                        | Case No.                      |               |
|-------|--------------------------------------------|----------------------------------------|-------------------------------|---------------|
|       |                                            | Debtor(s)                              | Chapter 7                     |               |
|       | VE                                         | CRIFICATION OF CREDITOR N              | MATRIX                        |               |
|       |                                            | Number o                               | f Creditors:                  | 13            |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | tors is true and correct to t | he best of my |
| Date: | November 19, 2015                          | /s/ Mary D. Wagner<br>Mary D. Wagner   |                               |               |

Barclays Bank Delaware 125 S. West Street Wilmington, DE 19801

Chase Auto Finance P.O. Box 9001937 Louisville, KY 40290-1937

Citi Diamond Preferred Card Citi Cards P.O. Box 6004 Sioux Falls, SD 57117-6004

Citi Thank You Preferred Card Citi Cards P.O. Box 78045 Phoenix, AZ 85062-8045

Citicards CBNA 701 E. 60th St. North Sioux Falls, SD 57104

Discover Open Road Card P.O. Box 6103 Carol Stream, IL 60197-6103

First National Bank Omaha Visa P.O. Box 2557 Omaha, NE 68103-2557

Juniper Card Services P.O. Box 60517 City of Industry, CA 91716-0517

Kohl's
P.O. Box 2983
Milwaukee, WI 53201-2983

Nissan-Infiniti LT P.O. Box 660366 Dallas, TX 75266-0366

Target Card Services P.O. Box 660170 Dallas, TX 75266-0170

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U.S. Bank P.O. Box 108 Saint Louis, MO 63166-0108

Walmart Mastercard/Syncb P.O. Box 960024 Orlando, FL 32896-0024